PTO/SB/08b (09-08)

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|----------|----------------------------------------------------------|------|----------|------------------------|------------------------|--|
| Ì        | DESCRICTE TO TOTAL 144024.                               |      |          | Application Number     | 10/594,594-Conf. #3797 |  |
|          | INFORMATIC                                               | N DI | SCLOSURE | Filing Date            | May 8, 2007            |  |
|          | STATEMENT BY APPLICANT (Use as many sheets as necessary) |      |          | First Named Inventor   | Taketoshi USUI         |  |
|          |                                                          |      |          | Art Unit               | 1796                   |  |
|          |                                                          |      |          | Examiner Name          | M. J. Feely            |  |
| She      | et 1                                                     | of   | 1        | Attorney Docket Number | 0152-0743PUS1          |  |

| U.S. PATENT DOCUMENTS |                                         |                                                            |                                        |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
|-----------------------|-----------------------------------------|------------------------------------------------------------|----------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Examiner<br>Initials* | Cite<br>No.                             | Document Number  Number-Kind Code <sup>2</sup> ( if known) | Publication Date                       | Applicant of Cited Document             | Pages, Columns, Lines, Where<br>Relevant Passages or Relevant<br>Figures Appear                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| /MF/                  | AA*                                     |                                                            |                                        | Lehmann et al.                          | 10060010000000000000000000000000000000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| /MF7                  |                                         |                                                            | 11-30-1999                             | Higuchi et al.                          | STATEMENT STATEM |  |
|                       | ,                                       |                                                            |                                        | 20000000000000000000000000000000000000  | 0000574900000000075799000000000000000000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
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| FOREIGN PATENT DOCUMENTS                |                                         |                                                                                  |                                         |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| Examiner                                | Cite                                    | Foreign Patent Document                                                          | Publication<br>Date                     | Name of Palentee or         | Pages, Columns, Lines,<br>Where Relevant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | +6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Initials*                               | No.1                                    | Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (# known) | MM-DD-YYYY                              | Applicant of Cited Document | Passages Or Relevant<br>Figures Appear                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | _ '                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| /MF/                                    | BA                                      | JP-59-038226-A                                                                   | 03-02-1984                              | Mitsubishi Rayon Co Ltd     | TO STATE OF THE PARTY OF THE PA | Abs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| /MF/                                    | 1                                       | EP-0 955 675-A2                                                                  | 11-10-1999                              |                             | THE REAL PROPERTY AND ADDRESS OF THE PERSON  | A CONTRACTOR OF THE PARTY OF TH |
|                                         |                                         |                                                                                  |                                         | TOTAL CT CIT.               | 200000000000000000000000000000000000000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| Examiner     | /N. N. T. T. C. C. T. ( |       | Date       | 02/23/2010 |
|--------------|-------------------------|-------|------------|------------|
| Signature    | /Michael Feely/         | le le | Considered | 02/23/2010 |
| Jaignature ( |                         |       |            |            |

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. \*CITE NO.: Those application(s) which are marked with an single asterisk (\*) next to the Cite No. are not supplied (under 37 CFR 1.98(e)(2)(iii)) because that application was filed after June 30, 2003 or is available in the IFW. \*Applicant's unique citation designation number (optional). \*See Kinds Codes of USPTO Patent Documents at <a href="https://www.uspto.gov">www.uspto.gov</a> or MPEP 901.04. \*Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). \*For Japanese patent documents, the Indication of the year of the reign of the Emperor must precede the serial number of the patent document. \*Skind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. \*Applicant is to place a check mark here if English language Translation is attached.

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| /MF/                 | CA           | ZHAO et al., Conference Proceedings, Society of Plastics Engineers. Annual Technical Conferences, May 2, 1999, pp. 921-924.                                                                                                                                       | Market Market |
| Examiner<br>Initials | Cite<br>No.1 | Include name of the author ( in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journ al, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T'            |
|                      | •            | NON PATENT LITERATURE DOCUMENTS                                                                                                                                                                                                                                   | ,             |

| Examiner /Michael Feely/ | Date<br>Considered | 02/23/2010 |
|--------------------------|--------------------|------------|

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Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.